Dealing with our 'in-vironment': new aspects of inflammatory bowel disease pathogenesis and therapy

Rogler, Gerhard

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Dealing with Our 'In-Vironment': New Aspects of Inflammatory Bowel Disease Pathogenesis and Therapy

Our understanding of the pathogenesis of inflammatory bowel disease (IBD) has dramatically changed during recent years. The focus of research has shifted from adaptive immunity to genetic risk factors and now to disturbances in innate immunity and the interactions of the mucosal immune system with the content of the gut – our 'in-vironment'. The in-vironment is a term introduced by Michael Mayerfeld Bell in his book 'An Invitation to Environmental Sociology'. He describes it as the 'human body, which is continuously interacting with the environment'. He points to the fact that eating and drinking are particular ways for humans to interact with their environment.

The groundbreaking insights gained in the last years indicate that the genetic factors only contribute 50% to the risk of developing IBD and that environmental factors may trigger or even cause the disease. These factors mediate their effects via uptake into the human body. They may change the composition of our microbiome making it more proinflammatory or aggressive. Other factors may directly act on the intestinal barrier function.

Our therapeutic approaches still mainly focus on regulating adaptive immunity. Only recently have the barrier function of the gut mucosa and the defense function of the innate immune system come into focus. A recent FALK meeting entitled 'Dealing with our 'In-vironment': New Aspects in IBD Pathogenesis and Therapy' was, therefore, centered around recent discoveries that may change future treatment strategies. In a 2-day meeting, genetic risk factors in IBD, antibacterial defense mechanisms, the epithelial barrier as a border to the in-vironment, environmental factors in pathogenesis, disease markers, new therapeutic approaches and future therapeutic direction were discussed. The articles summarized here cover the most important aspects of the meeting and highlight the role of the in-vironment in IBD pathogenesis.

Gerhard Rogler, Zürich

KARGER

Fax +41 61 306 12 34
E-Mail karger@karger.ch
www.karger.com

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